

RESPONSE UNDER 37 CFR 1.116 EXPEDITED PROCEDURE EXAMINING GROUP 2837

Docket No.: 1572.1240

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

Jin-hyuk CHOI et al.

Serial No. 10/802,926

Group Art Unit: 2837

Confirmation No. 5416

Filed: March 18, 2004

Examiner: Eduardo S. Colon

For: REACTION APPARATUS

AMENDMENT AFTER FINAL REJECTION

Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450

Attention: BOX AF

Sir:

This is in response to the final Office Action mailed January 24, 2006, and having a period for response set to expire on April 24, 2006.

The following amendments and remarks are respectfully submitted. Reconsideration of the claims is respectfully requested.

OIPE 12.3

Win Als you

S&H Form: (02/05)

REPLY/AMENDMENT FEE TRANSMITTAL

Attorney Docket No. 1572.1240

Application Number 10/802,926

Filing Date March 18, 2004

First Named Inventor Jin-hyuk CHOI et al.

Group Art Unit 2837

Examiner Name Eduardo S. Colon

AMOUNT ENCLOSED			0.00	0.00 Examiner Name		Eduardo S. Colon						
FEE CALCULATION (fees effective 12/08/04)												
	CLAIMS AS Claims Remaining AMENDED After Amendment		Highest Number Previously Paid For		Number Extra		Rate		Calculations			
TOTAL	L CLAIMS	41		- 43 =		0	X	X \$ 50.00 =		\$	0.00	
INDEP CLAIM	PENDENT IS	NDENT 3		- 4=		0	Х	X \$ 200.00 =			0.00	
Since an Official Action set an <u>original</u> due date of _, petition is hereby made for an extension to cover the date this reply is filed for which the requisite fee is enclosed (1 month (\$120)); (2 months (\$450)); (3 months (\$1,020)); (4 months (\$1,590)); (5 months (\$2,160):												
If Noti	ice of Appea	al is enclos	ed, add (\$500	.00)								
If Statutory Disclaimer under Rule 20(d) is enclosed, add fee (\$130.00)												
Information Disclosure Statement (Rule 1.17(p)) (\$180.00)												
Total of above Calculations =										\$	0.00	
Reduction by 50% for filing by small entity (37 CFR 1.9, 1.27 & 1.28)												
TOTAL FEES DUE =										\$	0.00	
(1) If entry (1) is less than entry (2), entry (3) is "0".												
(2) If entry (2) is less than 20, change entry (2) to "20". (4) If entry (4) is less than entry (5), entry (6) is "0".												
(4) If entry (4) is less than entry (5), entry (6) is 0. (5) If entry (5) is less than 3, change entry (5) to "3".												
METHOD OF PAYMENT												
	Check enclosed as payment.											
	Charge "TOTAL FEES DUE" to the Deposit Account No. below.											
⋈	No payment is enclosed.											
				GENER	RAL AUTH	IORIZATION						
	any overpayment or charge any additional fees necessary to: Deposit Account No. 19-3935											
	· · · · · · · · · · · · · · · · · · ·											
SUBMITTED BY: STAAS & HALSEY LLP												
Typed Name Lisa A. Kilday Reg. No. 56,210										0		

Typed Name Lisa A. Kilday Reg. No. 56,210

Signature Date 3/3//66

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